FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL									
OMB Num			5-0076						
Expires: Estimated	April	30,2	800						
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hours per r	espon	se	.16.00						

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New Coffee (College Mark State Control of the College Mark State Colle	SEC
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Tenant In Common (TIC) Interests in Procter & Gamble Building, Fayetteville, AR	Mail Processing
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing: New Filing Amendment	
	JAN 2 9 2008
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	Mashinston DO
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	Washington, DC
DCTRT Leasing Corp.	101
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
518 17th Street, 17th Floor, Denver, CO 80202	(303) 228-2200
Address of Principal Business Operations (Number and PROCESSED (c) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Owner of commercial real estate	
THOMSON	
Type of Business Organization FINANCIAL	
corporation limited partnership, already formed other (please spec
business trust limited partnership, to be formed	08022066
Month Year	-
	mated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	:: [][]
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GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer Director General and/or Check Box(es) that Apply: ✓ Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) John Biallas Business or Residence Address (Number and Street, City, State, Zip Code) 518 17th Street, Ste. 1700, Denver, CO 80202 Beneficial Owner 📝 Executive Officer 💆 Director General and/or Check Box(es) that Apply: ✓ Promoter Managing Partner Full Name (Last name first, if individual) Jackie M. Hawkey Business or Residence Address (Number and Street, City, State, Zip Code) 518 17th Street, Ste. 1700, Denver, CO 80202 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Jill Mozer Business or Residence Address (Number and Street, City, State, Zip Code) 518 17th Street, Ste. 1700 Denver, CO 80202 Check Box(es) that Apply: Promoter Beneficial Owner DE Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Troy Bloom Business or Residence Address (Number and Street, City, State, Zip Code) 518 17th Street, Ste. 1700, Denver, CO 80202 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Dividend Capital Total Realty Operating Partnership LP Business or Residence Address (Number and Street, City, State, Zip Code) 518 17th Street, Ste 1700, Denver, CO 80202 General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Sas5,000.00		•				В. Б	NFORMAT	ION ABOU	T OFFERI	NG				
Answer also in Appendix. Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?		I I 4b -			h . : : .	-1d to o-	11 40 000 0	aanaditad i		this offsui				
2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering [14] a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer only. Full Name (Last name first, if individual) Sant Hylton Business or Residence Address (Number and Street, City, State, Zip Code) 1440 E Arlington Blvd., Suite B, Greenville, NC 27858 Name of Associated Broker or Dealer Scott & Stingfellow States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	ι.	mas the	issuer sold	, or does t								***************************************	L	×
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	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

				В. 1	NFORMAT	ION ABOU	T OFFERI	NG				
1. Has	the issuer sol	d, or does t	he issuer ir	ntend to se	II, to non-a	ccredited i	nvestors in	this offeri	ing?		Yes	No *
			Ans	wer also ir	Appendix.	Column 2	t, if filing t	under ULC	E.			
2. Wha	t is the minin	num investr	nent that w	ill be acce	pted from a	ıny individ	ual?				<u> </u>	5,000.00
3. Doe:	the offering	permit join	t ownershi	p of a sing	de unit?	••••••	••••••				Yes K	No
com lf a p or st	r the informa mission or sin terson to be li ates. list the n oker or dealer	nilar remune sted is an as ame of the l	eration for s sociated pe proker or de	olicitation rson or age aler. If me	of purchase ent of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Full Nam Ray Pet	e (Last name erson	first, if ind	ividual)									
Business	or Residence	Address (N	Number and	Street, C	ity. State. Z	ip Code)						=
130 Nort	n Main St. St	iite 250, Bu	itte, MT 59	701								
	Associated B		aler									
	Street Investr		0.11.1.1			× 1	-					11.18.18.
	Which Persock "All State										☐ Al	l States
	(7.77)	<u>िक</u> ी	رعی		[70]	[OT]	[DP]	क्रिक	[75] \	क्टि		
IL M/T RI	IN NE	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Nam David B	e (Last name russeau	first, if ind	ividual)					_				
	or Residenc Foothill Blvd,					Zip Code)						
	Associated B											
	dent Financi			7 . 1	. 0 1: : : 1							
	Which Perso ck "All State								,		□ A1	l States
	। जिल्हा	(G	(FE)	[OK]	[60]	[OT]	[BE]	[BG]	[ET]	[तर]	[-	(ID)
AL IL		AZ IA	AR KS	GA KY	CO LA	CT ME	DE MD	DC MA	FL ML	GA MN	MS	MO
MT		NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI		SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Nam	e (Last name	first, if ind	ividual)								•	
Business	or Residenc	e Address (Number an	d Street, C	City, State, 2	Zip Code)		 				
	rest View Lai			, MN 5536	9							
	Associated B		aler									
	Planning Co Which Perso		e Soligited	or Intende	to Coligit	Durchacare						
	ck "All State						,	,			☐ AI	l States
AL IL MT	IN NE	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В. 17	NFORMATI	ION ABOU	T OFFERI	NG				
L												Yes	No
ι.	Has the	issuer sold	, or does th			ll, to non-a							Ī
						Appendix.						a 335	5,000.00
2.	What is	the minim	um investn	nent that w	ill be acce	pted from a	iny individ	ual?			•••••	.5	
3.	Does the	offering p	permit join	t ownershi	p of a sing	le unit?				··································	•••••	Yes	No
4.											irectly, any		
											he offering. with a state		
	or states	list the na	me of the b	roker or de	aler. If mo	ore than five	e (5) persor	ns to be list	ed are asso		ons of such		
					informati	on for that	broker or o	dealer only	/. 				
	Name (I ristopher		first, if ind	ividual)									
Bus	iness or I	Residence	Address (N	lumber and	Street, Ci	ty. State. Z	(ip Code)						
-			Omaha, N										
			oker or De	aler									
	_	Investme		s Solicited	or Intends	to Solicit l	Purchasers						
Stat													l States
	(Oncon	7 m States	or elicen		State5) 11	••••							
		[AK]	ΛZ	AR	CA	CO	CT	DE	[DC]	FL	GA.	HI	
	IL MT	IN NE	IA NV	KS [NH]	KY NJ	LA NM	ME] [NY]	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA]
	RI	SC	SD	TN	TX	UT	$\overline{[VT]}$	VA	WA	WV	WI	WY	PR
			<u></u>										
			first, if ind	ividual)									
	than Wed		Address ()	Number an	d Street, C	ity, State.	Zin Code)			···			
			ing, Suite			-	aip code;						
			oker or De	aler									
		gan & Co		- C - 1: -:4- d		C-1:-/.	D		-			-	
Stat						to Solicit l						∆ I	l States
	Спеск	An States	or check	maividuai	States)	***************************************	******************					<u> </u>	i States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL TO	₩.	IA	KS	KY (XY)	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	[NH]	[NJ]	NM UT	NY VT	NC VA	ND WA	ЮH WV	OK WI	OR WY	PA PR
					127				(17.11)				
Full	Name (I	ast name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	lity, State, 2	Zip Code)		•				
													
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit l	Purchasers					•	
	(Check	All States	" or check	individual	States)								l States
	AL	AK	AZ	AR	CA	CO	CT	(DE)	DC	FL	GA	HI	ID
	IL	ĪÑ	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE.	NV	NH	NJ	NM	NY	NC]	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	(VT)	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS $% \left(\mathbf{r}\right) =\left(\mathbf{r}\right)$

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	3	\$
	Equity	S	
	Common Preferred		
	Convertible Securities (including warrants)	<u> </u>	\$
	Partnership Interests		
	Other (SpecifyTIC Interest)	11,617,430.00	\$_6,898,165.01
	Total	11,617,430.00	\$_6,898,165.01
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
			\$ 6,898,165.01
	Accredited Investors		Ψ
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	§ 755,132.95
	Other Expenses (identify) Non-Accountable Expense Allowance		<u>\$</u> 174,261.45
	Total	-	\$ 929,394.40

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	•	\$10,688,035.60
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers. Directors, & Affiliates	Payments to Others
	Salaries and fees	<u>\$ 10,455,687</u>	
	Purchase of real estate	 \$	S
	Purchase, rental or leasing and installation of machinery and equipment		\$
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	¬\$	□\$
	Repayment of indebtedness		
	Working capital	_	
	Other (specify): Transaction Facilitation Fee		S 232,348.60
			\$
	Column Totals	<u>\$10,455,687.</u> 0	\$_232,348.60
	Total Payments Listed (column totals added)	□ \$ <u>10</u>	,688,035.60
	D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of F	sion, upon writter	
SS	uer (Print or Type) Signature	Date	
DO	CTRT Leasing Corp.	1.65.00	
	me of Signer (Print or Type) Title of Signer (Print of Type) Wozer Vice President		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

APPENDIX 2 3 4 1 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach explanation of to non-accredited offering price Type of investor and amount purchased in State waiver granted) investors in State offered in state (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Non-Accredited Accredited Yes No State Yes No **Investors** Amount Investors Amount X ΑL × ΑK X × AZX × X AR× \$3,002,024. 0 CA **TIC Interest** 6 \$0.00 X X CO × X **TIC Interest** 1 \$504,044.91 0 \$0.00 CT X X × DE x DC X × X FL × X GAН X X × ID X 1 \$789,124.3: 0 \$0.00 X IL **TIC Interest** × IN **TIC Interest** 2 X 0 \$0.00 X \$199,349.00 IA X × KS KY x X × LA ME X X MD X X × MA X ΜI × \$0.00 **TIC Interest** \$448,052.5 0 MN X 1 x MS X X

APPENDIX 4 2 3 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of Type of investor and to non-accredited offering price waiver granted) amount purchased in State investors in State offered in state (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Amount Yes No Investors **Amount** State X MO X \$195,838.900 **TIC Interest** 1 \$0.00 X MT x **TIC Interest** \$0.00 × 0 NE × 1 \$231,220.5 × NVX X NH X X NJ X X × NM 1 × NY \$0.00 X **TIC Interest** 1 \$440,411.6 0 NC X ND X ОН × OK X ٨ × X OR X PA × × RI × X X SC X SD X TN X TX× x x UT X VT × X X VAX \$875,365.7! 0 \$0.00 X **TIC Interest** 1 WA X X WV × \$212,732.63 0 WI \$0.00

1

TIC Interest

×

				APP	ENDIX			****			
1		2	3		5 Disqua	lification					
	to non-a	to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY		×							×		
PR		×	:						×		

